

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>TA</i>	<i>67814</i>	<i>4/26/00</i>
O.I.P.E. CLASSIFIER		<i>21</i>	<i>4/29/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>59158</i>	<i>6-26-00</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	<i>03/00</i>
2	<i>21/16</i>
3	<i>03/02</i>
4	<i>03/02</i>
5	<i>03/02</i>
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7	<i>03/02</i>
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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